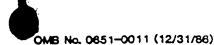
DECLARATION FOR PATENT APPLICATION

Docket Number (Optional)

DECI	LARA-TION FOR PATENT	APPLICATION F	booker (verilber (optional)	
As a below named inventor, I h	nereby declare that:			
My residence, post office addre	ess and citizenship are as stated bel	ow next to my name.		
I believe I am the original, first names are listed below) of the REMOTE CONTROLLER	and sole inventor (if only one name subject matter which is claimed and WITH ANALOG BUTTON(is listed below) or an original, fir for which a patent is sought on	rst and joint inventor (if plural the invention entitled , the specification of which	
is attached hereto unless the f	ollowing box is checked:			
	as United States App	olication Number or PCT Interna	tional Application	
	and was amended on			
amended by any amendment of acknowledge the duty to discinct Regulations, § 1.56.	wed and understand the contents of referred to above. lose information which is material to benefits under Title 35, United States	patentability as defined in Title (37, Code of Federal	
inventor's certificate listed belo	w and have also identified below any of the application on which priority is	y foreign application for patent o	or inventor's certificate	
Prior Foreign Application(s)	·· · ·		Priority Claimed ☐ Yes ☐ No	
(Number)	(Country)	(Day/Month/Year Filed)		
(Memoor)			Yes 🗌 No	
(Number)	(Country)	(Day/Month/Year Filed)	Yes [] No	
(Number)	(Country)	(Day/Month/Year Filed)	•	
of the prior application and the (Application Number)	national or PCT international filing d (Filing Date)	ate of this application. (Status patented, pending, abandoned)		
(Application Number)	(Filing Date)	(Status	(Status patented, pending, abandoned)	
	attorney(s) and/or agent(s) to prosect onnected therewith: NO NE			
Address all telephone calls to	Brad A. Armstrong	at telephone number _52	30 872 9148	
Address all correspondence to	Brad A. Armstrong P.O. Box 1419			
•	Paradise, CA 95967			
	Paradise, CA 97907			
belief are believed to be true; a like so made are punishable by such willful false statements ma Full name of sole or first inven	ents made herein of my own knowled and further that these statements were fine or imprisonment, or both, under any jeopardize the validity of the appliance (given name family name) BY	e made with the knowledge that r Section 1001 of Title 18 of the	t willful false statements and the United States Code and that	
Inventor's signature Paradise,	CA 95967 /USA	Chizenship USA	A	
Post Office Address Brad		ox 1419, Paradise	, CA 95967	
	4 11			
	ntor, if any (given name, family name			
		Date		
•				

Additional inventors are being named on separately numbered sheets attached hereto.





			OMB No. 0851-0011 (12/31/86)
Applicant	or Patentee: Brad	A. Armstrong	Attorney's
Carial as 1	Parent No :		Docket No.: _none
For: RE	MOTE CONTROLLE	R WITH ANALOG BUTTON(S)	
	STATUS (3	TATEMENT (DECLARATION) CLAIMI 7 CFR 1.9 (f) and 1.27 (b)) — INDEPEN	IDENT INVENTOR
As a below poses of p Office with described	paying reduced fees under the regard to the invention	y declare that I qualify as an independent is section 41 (a) and (b) of Title 35. United n entitled REMOTE CONTROLLER	nventor as defined in 37 CFR 1.9 (c) for pur- States Code, to the Patent and Trademark WITH ANALOG BUTTON(S)
KX)	the specification filed her	ewith	
	application serial no	, file, issued	ed
or license,	, any rights in the invention hat person had made the i	on to any person who could not be classific	under contract or law to assign, grant, conveyed as an independent inventor under 37 CFR not qualify as a small business concern under
Each persunder con	on, concern or organization tract or law to assign, gr	on to which I have assigned, granted, convant, convey, or license any rights in the it	veyed, or licensed or am under an obligation evention is listed below:
[4]	no such person, concern, persons, concerns or orga	or organization inizations listed below•	
	*NOTE: Separate verif tion having rights to th	ied statements are required from each name invention averring to their status as sma	ned person, concern or organiza- all entities. (37 CFR 1.27)
FULL NA	ME		
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	[INDIVIDUAL		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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ADDRES:	I I INDIVIDUAL	SMALL BUSINESS CONCERN	I NONPROFIT ORGANIZATION
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ment to st due after: I hereby de and belief and the like Code, and	mall entity status prior to the date on which status eclare that all statements r are believed to be true; and te so made are punishable	paying, or at the time of paying, the earl as a small entity is no longer appropriate. made herein of my own knowledge are true d further that these statements were made we by fine or imprisonment, or both, under atements may jeopardize the validity of the	liest of the issue fee or any maintenance fee (37 CFR 1.28 (b)) and that all statements made on information ith the knowledge that willful false statements section 1001 of Title 18 of the United States
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